

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	100	67814	9/8/00
O.I.P.E. CLASSIFIER		21	9/14/00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	W	64830	10-23

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 -+ Restricted O Objected

Claim	Date
Final	
Original	
1 ✓	
2 ✓	
3 ✓	
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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